

*****PLEASE SUBMIT TO THE CLERK TO THE BOARD*****

Time Limitations May Be Imposed By the Chair

✓
201

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SPEAKER CARD
(Please print)

DATE: 12/6/5

AGENDA ITEM NO. Only SUBJECT: 303(d) List Report

SUPPORT _____ OPPOSE _____ Information

YOUR NAME: Bruce Gwynne

TITLE: Environmental Scientist

EMAIL: bgwynne@waterboards.ca.gov

WHOM DO YOU REPRESENT? NC Regional Water Quality Control Bd.
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 5550 Skylane Blvd. Suite A Santa Rosa, CA 95404

REMARKS: Available for clarification of North Coast Issues

Regions Addressed Region 1 Power Point? Yes/No

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SPEAKER CARD
(Please print)

DATE: 06 DEC 05

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: CRAIG JOHNS TITLE: _____

EMAIL: cjohns@calrestatz.com

WHOM DO YOU REPRESENT? City of Santa Rosa
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 980 9th Street Suite 2200 Sacto 95814

REMARKS: _____

Regions Addressed: N.Coast PowerPoint? Yes/No

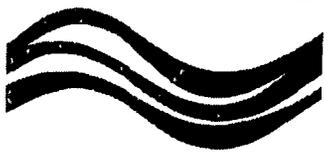
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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: ~~303~~ 303(a) delisting - Laguna de Santa Rosa

SUPPORT _____ OPPOSE

YOUR NAME: DAN SCHURMAN TITLE: EXECUTIVE DIRECTOR
~~LAGUNA FOUNDATION~~

EMAIL: dan@lagunafoundation.org

WHOM DO YOU REPRESENT? LAGUNA de SANTA ROSA FOUNDATION
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 50 Old Courthouse Square Suite 609 Santa Rosa CA 95404

REMARKS: _____

Regions Addressed: Laguna de Santa Rosa

Powerpoint? Yes/No

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SPEAKER CARD
(Please print)

DATE: 12-6-05

AGENDA ITEM NO. _____ SUBJECT: 2006 303 (d) List

SUPPORT _____ OPPOSE _____

YOUR NAME: Noreen Evans TITLE: Assembly member

EMAIL: Assemblymember.Evans@assembly.ca.gov

WHOM DO YOU REPRESENT? 7th District, Dem. Napa-Solano-Sonoma
(Please identify, such as: self, name of firm, public agency, environmental agency) Counties

ADDRESS: State Capitol, P.O. Box 942849, SAC, CA 94249-0007

REMARKS: _____

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7th District

Regions Addressed:

Klamath Sediment PowerPoint?

Yes/No No

NORTH COAST, Region 1

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SPEAKER CARD
(Please print)

DATE: _____

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT X OPPOSE _____

YOUR NAME: Denver Nelson TITLE: MD

EMAIL: dennel@cox.net

WHOM DO YOU REPRESENT? self
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 5240 Blackberry, Eureka, CA 95303

REMARKS: _____

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SPEAKER CARD
(Please print)

DATE: 12-6-05

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: Brenda Adelman TITLE: Chair of Board

EMAIL: vrwpc@earthlink.net

WHOM DO YOU REPRESENT? Russian River Watershed Protection
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: Po Box 501 Guerneville CA 95446
Committee

REMARKS: oppose Laguna de-listing for phos. & nit.

Regions Addressed: Laguna de Santa Rosa Power Point? Yes No

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Regions Addressed: 1

Powerpoint? Yes/No

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SPEAKER CARD
(Please print)

DATE: 5/12/06

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: Mike Sandler TITLE: Program Coordinator

EMAIL: mike.e.cawi.org

WHOM DO YOU REPRESENT? Community Clean Water Institute -
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 6741 Sebastopol Ave. Suite 140 Sebastopol, CA 95472

REMARKS: _____

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Regions Addressed: Region I

Powerpoint? Yes No

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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: Laguna de Santa Rosa

SUPPORT _____ OPPOSE Proposed Belying Point

YOUR NAME: Alta Levine TITLE: Director

EMAIL: _____

WHOM DO YOU REPRESENT? Coast Action Group
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: Box 215, Point Arena, CA 95468-95468

REMARKS: _____

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Regions Addressed ONE Russian Rules & Tributaries Cayman Powerpoint? Yes / NO

Doesn't WANT TO SPEAK FIRST

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Time Limitations May Be Imposed By the Chair



SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: Delisting

SUPPORT _____ OPPOSE

YOUR NAME: Bob Rawson TITLE: President

EMAIL: iws@sonic.net

WHOM DO YOU REPRESENT? International Wastewater Solutions Corp.
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: P.O. Box 157, Sebastopol CA 95473

REMARKS: See Attachment D of Nancy Kay Web paper *PERSONAL observation*

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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: 30.3 (d) listing workshop

SUPPORT X OPPOSE X

YOUR NAME: Peter Ribar

TITLE: Resource Manager

EMAIL: pribar@campbellgroup.com

WHOM DO YOU REPRESENT? Campbell Timberland Management
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: P.O. Box 1228 Fort Bragg, CA 95437

REMARKS: Inappropriate use of Sullivan (2000) temperature thresholds

Regions Addressed: North Coast

PowerPoint? Yes / No

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wants to speak separately on R1 + then the other regions.

SPEAKER CARD
(Please print)

DATE: 12/10/05

211

AGENDA ITEM NO. _____ SUBJECT: 303(d) list update

SUPPORT _____ OPPOSE _____

YOUR NAME: Cynthia Elkins TITLE: _____

EMAIL: Celkins@biologicaldiversity.org

WHOM DO YOU REPRESENT? Center for Biological Diversity
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: _____

REMARKS: Region 1 & Central Valley

Regions Addressed: _____ PowerPoint? Yes (No)

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Regions Addressed: multiple

PowerPoint? yes / No

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SPEAKER CARD
(Please print)

DATE: 12/06/05

AGENDA ITEM NO. _____ SUBJECT: 303 & list

SUPPORT BOTH POSE

YOUR NAME: PETER KOZELKA TITLE: Env. Scientist

EMAIL: _____

WHOM DO YOU REPRESENT? US ERA
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: USEPA R9 75 Hawthorne St. WTR-2 SF CA

REMARKS: _____ 9/10/05

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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: 303d Listing

SUPPORT _____ OPPOSE _____

YOUR NAME: Jim Curland TITLE: Marine Program Assoc

EMAIL: jcurland@defenders.org

WHOM DO YOU REPRESENT? Defenders of Wildlife
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: P.O. Box 959 Moss Landing 95039

REMARKS: _____

Region(s) Addressed: Central Coast PowerPoint? Yes / No

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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: Sejal Choksi

TITLE: San Francisco Baykeeper

EMAIL: sejal@baykeeper.org

WHOM DO YOU REPRESENT? Baykeeper
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 55 Hawthorne St. Ste 550 SF 94105

REMARKS: _____

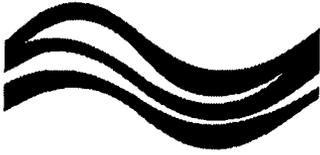
Regions Addressed = 2 PowerPoint? Yes / No

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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: TMDLs

SUPPORT _____ OPPOSE _____

YOUR NAME: Linda Sheehan TITLE: Exec. Director

EMAIL: lsheehan@coastkeeper.org

WHOM DO YOU REPRESENT? CA Coastkeeper Alliance
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: PO Box 3156 Fremont CA 94539

REMARKS: _____

Regions Addressed! all Power Point? Yes / No

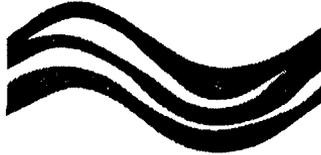
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Regions Addressed? 5
PowerPoint? (Yes) / No

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SPEAKER CARD
(Please print)

DATE: _____

AGENDA ITEM NO. _____ SUBJECT: 303^d List

SUPPORT _____ OPPOSE _____

YOUR NAME: Joe Karkoski TITLE: Sr. Water Resources Control Engr.

EMAIL: jkarkoski@costwaterboards.ca.gov

WHOM DO YOU REPRESENT? Central Valley RB
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: _____

REMARKS: _____

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SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: Tim O'Laughlin TITLE: Att

EMAIL: _____

WHOM DO YOU REPRESENT? SJRGA SJR Group Authority
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: _____

REMARKS: _____

Regions Addressed: CVRWQCS Powerpoint? (Yes) No

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SJR LSTR

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SPEAKER CARD
(Please print)

DATE: 12-6-05

AGENDA ITEM NO. _____ SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: ARTHUR GODWIN TITLE: _____

EMAIL: agodwin@mrgb.org

WHOM DO YOU REPRESENT? Merced Inv. Dist.
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 700 Loughborough Dr #D, Merced CA 95348

REMARKS: _____

Regions Addressed: Central Valley Powerpoint? Yes / No

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Region (s) addressed 5 PowerPoint? Yes / No ✓

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SPEAKER CARD
(Please print)

DATE: 12/4/05

AGENDA ITEM NO. 303(d) SUBJECT: _____

SUPPORT _____ OPPOSE _____

YOUR NAME: JOHN HERRICK

TITLE: COUNSEL/MANAGER

EMAIL: jherrlaw@aol.com

WHOM DO YOU REPRESENT? SOUTH DELTA WATER AGENCY
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 4255 Pacific St 2 Stockton 95207

REMARKS: _____

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Regions Addressed: 5

PowerPoint? (Yes) / No

220 BEFORE
CINDY PAULSON ✓

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PAULSON & LIEBERBACH



SPEAKER CARD
(Please print)

DATE: 12/6/05

AGENDA ITEM NO. _____ SUBJECT: 303(d) list

SUPPORT _____ OPPOSE _____

YOUR NAME: Debra Lieberbach ^{Lieberbach} TITLE: Water Planning Dept. Mgr.

EMAIL: delieberbach@tid.org

WHOM DO YOU REPRESENT? Turlock, ID
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: P.O. Box 949, Turlock, CA. 95381

REMARKS: _____

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REGION ADDRESSED

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after
D. Litzersbach

Z PRESENTERS DEBRA LIEBEZACK + PAULSON
*****PLEASE SUBMIT TO THE CLERK TO THE BOARD*****

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SPEAKER CARD
(Please print)

DATE: 12-6-05

AGENDA ITEM NO. _____ SUBJECT: 303(a) list (TID)

SUPPORT _____ OPPOSE _____

YOUR NAME: Cindy Paulson TITLE: Senior vice President

EMAIL: cpaulson@brunncald.com

WHOM DO YOU REPRESENT? TID (Brown and Caldwell)
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 201 North Civic Dr Walnut Cr CA 94596

REMARKS:

Regions

Addressed: 5

PowerPoint?

Yes / No

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SPEAKER CARD
(Please print)

DATE: 12/6/2005

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AGENDA ITEM NO. 303(d) SUBJECT: FALL RIVER, SHASTA CO. -REVISE

SUPPORT _____ OPPOSE _____

YOUR NAME: ROBERT CAREY

TITLE: Wildlife Biologist

EMAIL: bobc@wmbeaty.com

WHOM DO YOU REPRESENT? W.M. BEATY : Assoc. Inc.
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: P.O. Box 990898 REDDING, CA 96099-0898

REMARKS: REMOVE SILVICULTURE AS SOURCE OF Sediment

Regions Addressed: Central Valley

Powerpoint? Yes/No (No)

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SPEAKER CARD
(Please print)

DATE: Dec. 6, 2005

AGENDA ITEM NO. _____ SUBJECT: 303 (d) listing

SUPPORT _____ OPPOSE _____

YOUR NAME: Lee Mao

TITLE: Regional Water Quality Coordinator

EMAIL: lmao@mp.usbr.gov

WHOM DO YOU REPRESENT? US. Bureau of Reclamation
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 2800 Cottage Way, Sacramento, CA 95825

REMARKS: _____

Regions Addressed: Region V

PowerPoint? Yes / No

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Regions Addressed: 5 PowerPoint? Yes / No

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SPEAKER CARD
(Please print)

DATE: 12-6-05

AGENDA ITEM NO. _____ SUBJECT: TMDLS

SUPPORT _____ OPPOSE _____

YOUR NAME: Carrie McNeil TITLE: Director Central Valley Chapk

EMAIL: ~~mcneil@~~ carrie@baykeeper.org

WHOM DO YOU REPRESENT? Deltakeeper - Baykeeper
(Please identify, such as: self, name of firm, public agency, environmental agency)

ADDRESS: 55 Hawthorne St Ste 550 SF CA 94105

REMARKS: _____

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